

**Child Protection Workers: Psychological Disorders and Symptoms**

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### Abstract

Psychological stress is a major contributor, directly or indirectly, to six of the leading causes of death in the United States. The primary purpose of this exploratory study was to measure the stress level of child protection workers according to the sub-specialty of their job duties. A cross-sectional survey was administered to child protection workers employed with the Cabinet for Health and Family Services in Warren County, Kentucky. Participants were rated in the categories of compassion fatigue, compassion satisfaction, and burnout. Study findings revealed that symptoms in the form of fatigue may be exhibited by child protection workers, and compassion satisfaction is possibly a protective factor against compassion fatigue and burnout. The quantitative data obtained through the study, indicated some validity that levels of fatigue may lead to the development or onset of psychological symptoms and disorders among child protection workers. The study met the objective of obtaining data which could be utilized by management in planning and implementing stress management interventions. Future studies should focus on the need for expansion of knowledge in the area of stress in the social work profession and a need for future implementation of stress-buffers.

## Child Protection Workers: Psychological Disorders and Symptoms

### Introduction

#### *Problem Statement*

Although social workers provide more mental health services than any other discipline, little is known about their own mental health. According to Ettner & Grzywacz (2001), two-thirds of office visits to family physicians are due to stress-related health problems. Psychological stress is a major contributor, directly or indirectly, to six of the leading causes of death in the United States. There is a growing awareness among health care professionals of a subtle, but powerful, association between mental stress and maintaining physical well-being.

The workplace stressors that employees are exposed to, consist of task, interpersonal, role, and physical demands. The demands of work overload, boundary extension, role ambiguity, role conflict, and career development are particularly relevant stressors (Storey & Billingham, 2001). Social workers often bring work home and let the challenges of their day interfere with other daily activities and time with their family. If these individuals experience psychological problems that are associated with the social work profession, they may have difficulties helping their clients deal with their situations to the best of their ability.

Reducing stress at work is not exclusively for the benefit of the worker, but also to improve the quality and quantity of work for those who obtain the services. To meet the challenge of reducing stress at work, an investigation is needed to assess whether certain sub-specialties of a child protection worker's job can play a role in the onset of psychological symptoms and disorders within social workers. The purpose of this study is to quantify the level of stress experienced by social workers in their particular job setting to analyze whether this has impact

on their psychological well-being. The study will hopefully meet the objective of obtaining data which could be utilized by management in planning and implementing stress management interventions.

Storey & Billingham (2001) explored occupational stress within social work. The interactive model of stress incorporates both the response-based and the stimulus-constraints placed on a person in relation to the supports that are available to them. The interactional model helps to explain that stress is not a simple causal relationship, but a complex interrelationship of many variables. The model was adopted within the study to identify the complex demands, constraints, and support for social workers.

The methodology included the development of a pilot study in rural and urban settings of a social services department. The pilot involved two social workers whose assignment was to complete questionnaires followed by personal interviews. The independent variable of job satisfaction was explored as to its impact on the dependant variable of stress level. Fifty questionnaires were then distributed by first author to five social work teams. Thirty four completed questionnaires were returned individually with the data analyzed using SPSS.

Storey & Billingham (2001) identified three themes among the measures suggested by the respondents. The themes revealed a call for more resources to be available, the opportunity for workers to have more personal leave, mutual support, and good supervision. Twenty-nine of the respondents provided descriptions of stressful experiences in social work. The responses included the experience of threat and physical harm, complaint procedures, workload and deadlines, reorganization and lack of supervisor support. A consistent theme that emerged illustrated respondents' awareness of stress in terms of the sources of stress, coping methods,

management within agency, and the presence of stress in the work itself. The results indicated that the majority of the respondents were experiencing different level of stress.

A limitation of the study is that it only included a small sample from one social services department. The study revealed a pattern between the two variables of age of respondent and stress level. A possible explanation of this pattern may be that the older a person gets, the better their coping strategies. They may also have strong supportive networks that help moderate the negative aspects of stress. The other explanation may be that the more skilled an individual is at their job, the better chance for promotions which give more power and control of reducing stress. Another limitation is that the resources and confines of the study did not encompass the effects of social work training and education on dealing with stress.

According to Storey & Billingham (2001), similar patterns emerged between the level of stress and the perceived effects of the service that social workers provided. The results indicated that there is indeed a level of stress that workers can experience that actually improves their job performance. However, at the same time, 28 respondents expressed that stress greatly impaired the quality of services provided. The effects of stress upon social workers' health appears to deteriorate from very good to generally good once they had started their job within social work. Despite this decline in health, only 21 respondents had taken up to one week of sick leave in last 12 months. Storey & Billingham (2001), report that in light of apparent low levels of sickness, the respondents may be healthy and not adversely affected by stress. According to Storey & Billingham 2001, they may be forcing themselves in to work for fear of reprisals from their managers.

The analysis of the data in this study indicated strategies to relieve stress were agreed on by all respondents. Previous research has focused primarily on the individual and their experiences

of stress; however this study focused on research to identify factors that are stressful and harmful for groups of individuals. It is apparent from high response rate that research into stress is clearly felt to be a relevant and important issue for the majority of social workers. The quantitative data indicated that perceived stress within the work place is prevalent at high levels for many individual. These individuals expressed that the perceived stress impacted their services and psychological health.

Lloyd, King, & Chenoweth (2002), found that significant administrative, societal, and political changes impacted the role of workers and the responsibilities they are expected to assume. The literature finds that social work is a highly stressful occupation with stress deriving in particular from role conflict between client advocacy and meeting agency needs. Lloyd et al., (2002) also recognizes that stress is a problem that is particularly associated with role ambiguity, discrepancies between ideas, work outcomes, and personal vulnerability characteristics of individuals who enter the profession.

The literature suggests that social workers have been found to have high levels of general anxiety, depression, and poor mental well-being as compared to the normative population. This research finds it difficult to determine whether this psychiatric symptomatology was already present, or whether the perceived stresses experienced by the social workers resulted in them developing such high levels of emotional distress. Earlier reviews find evidence that social workers in mental health experience lower levels of burnout than hospital or child protection workers (Ettner & Grzywacz, 2001). It can be noted that there is great diversity of social work roles and hence the potential for high variability in stress.

Lloyd et al., (2002) concluded that the literature has identified social work as being a profession that is at high risk of stress and burnout. The range of measures used in different

studies makes it difficult to compare results regarding the variety of factors associated with stress and burnout. Client-related factors were not used as measurements in any of the literature reviews which could have been a contributor to the onset of psychological disorders and symptoms among child protection workers.

A longitudinal study by Poulin & Walter, (1993) was the first large-scale longitudinal study of social work burnout. A number of organizational, client, and personal variables were used to predict the dependant variable of burnout among social workers. Of the three components of burnout, emotional fatigue was the condition most commonly associated with burnout. In addition, emotional fatigue has had substantially stronger correlations with the various organizational, clients, and personal predictor variables associated with burnout.

The study respondents were social workers who were members of the National Association of Social Workers. The respondents completed a mailed questionnaire and a follow up questionnaire a year later. The sample of social workers chosen was those that provide services to the elderly. A total of 2,700 social workers were mailed questionnaires with the response rate being 1,660 for a rate 61.5 percent. The follow up questionnaires were mailed to 1,196 study subjects one year later. A total of 937 questionnaires were returned.

The method included a comparison of respondents with non-respondents with one-way analysis of variance used to examine differences between the three groups of respondents. Mean differences were tested for length of time in social work, age, time with organization, burnout, job satisfaction, and satisfaction with social work. The Dependent variable in the study was the participants' responses to two questions: 1) Overall what effect does your job have on your physical health? 2) What effect does your job have on your emotional and mental health? The independent variable focused on demographic characteristics of the participants regarding their

response to the questions. The t-test was incorporated to reveal significant differences. Consistent with the findings of previous longitudinal investigations, burnout appeared to be a relatively stable phenomenon. According to Ettner & Grzywacz, (2001), almost two-thirds of the social workers' levels of burnout remained about the same over a one-year period. The emotional exhaustion component does not appear to shift up or down over relatively short periods of time, which increases the validity of previous findings based on cross-sectional designs.

The literature reviews reveal common themes regarding how individual social workers perceive, respond to, and are affected by stress. Organizational factors such as work pressure, work load, role ambiguity, and relationship with supervisor have been identified as primary predictors of these feelings. Further research is warranted to examine a wider range of potential stressors and the development of strategies for alleviating stress. A limitation revealed within the literature was that most research compared social work stress with general population norms rather than with stress levels of workers in comparable professions. The themes and limitations revealed in the literature reviews, reiterate the need for further research to assess whether certain sub-specialties of a child protection worker's job can play a role in the onset of psychological symptoms and disorders within social workers.

### *Research Question*

The specific research question addressed in this exploratory study was:  
To what extent do child protection workers exhibit symptoms consistent with psychological disorders?



### *Hypothesis*

Psychological symptoms are exhibited by child protection workers due to stressors of their specific job duties.

### *Method*

#### *Research Design*

The research design employed in this exploratory study was a cross-sectional survey, using a 66-item quantitative survey instrument. The primary focus of this cross-sectional design was to measure the stress level of child protections workers employed within the Cabinet for Health and Family Services in Warren County, Kentucky. No independent or dependent variables were indicated due to the study being exploratory in nature.

#### *Instrumentation*

The researcher utilized the 66-item Compassion Satisfaction/Fatigue Self Test (Figley & Stamm, 1996) that consisted of three subscales: compassion satisfaction, compassion fatigue, and burnout. Item range is 0-5; ranges of scales: burnout 0-85, compassion fatigue 0-115, and compassion satisfaction 0-130. High scores indicate a high risk for burnout or compassion fatigue and a high potential for compassion satisfaction. Reliability of scales is high (alphas .87 to .90). Additional questions were constructed by this researcher that consisted of demographic variables concerning participants' gender, age, length of time with agency, and specific job title.

#### *Sampling Method*

A purposive sampling method was employed in this study. Warren County child protection workers assigned particular job sub-specialties were purposely selected for inclusion in the sample. Twenty-five participants (child protection workers) were purposely selected from 12 sub-specialties for inclusion in the sample. The sub-specialties included the following: Generic,

Adoption/Permanency, Investigator, Ongoing/Treatment, Adult Service, Recruitment & Certification, Juvenile, Supervisor, Social Service Specialist, Trainer, Administrative Associate and CQI Specialist.

### *Study Site*

Research participants were interviewed at the Warren County Cabinet for Health and Family Services, Protection and Permanency Office. The Cabinet for Health and Family Services is located at 1010-1020 State Street Bowling Green, Kentucky.

### *Participant Recruitment and Informed Consent*

The participants were engaged in a purposive manner and queried as to their interest in participating in the study. If prospective participants indicated an interest, the researcher gave them a brief verbal overview of the study. If the participants were still interested in participating, the researcher reviewed the informed consent form with them, clarifying the purpose and details of the survey. The form covered the following areas: purpose of research, foreseeable risks, a statement on confidentiality of results, a statement of voluntary participation, and policy on the maintenance of records. Once this information was covered, the researcher proceeded with the study.

Regarding informed consent, after the participants indicated a desire to participate in the study they were given an informed consent form to read. The form covered the basic elements of informed consent. Specifically, the form indicated that participants would complete the Compassion Fatigue Inventory and demographic questionnaire for the purpose of measuring their stress level.

### *Data Collection*

Regarding specific data collection procedures, after the participants had received a copy of the informed consent form, the researcher commenced with the administration of the data collection instrument. The instrument was administered on a one time basis with the duration of the procedure lasting no longer than thirty minutes. The location of the procedure was conducted in the participant's personal offices due to the agreement that confidentiality could be maintained in this setting.

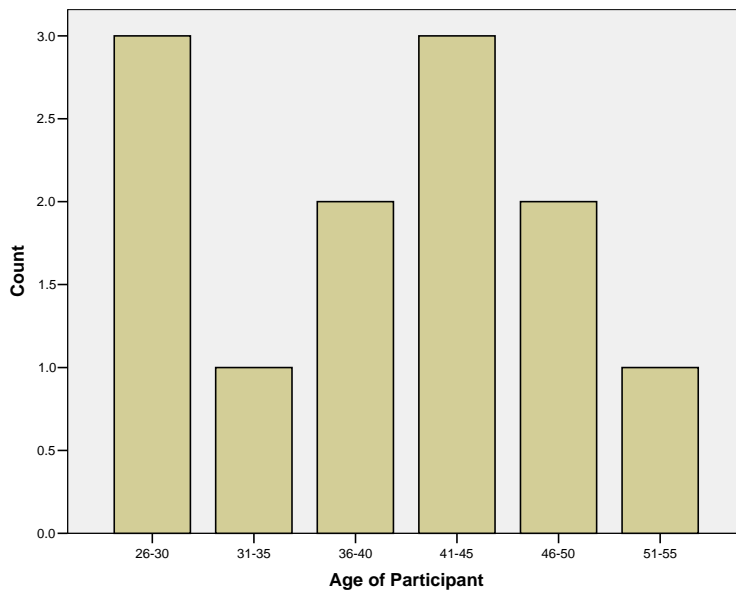
### *Statistical Analysis*

Quantitative data was analyzed using the Statistical Package for Social Sciences (SPSS). The analysis concerned itself with descriptive statistics. The study produced both quantitative and summated data from the retrieved results of the questionnaire. The statistical procedure utilized in study was quantitative with the primary focus of the research being to quantify the participants' level of stress in relevance to their current job sub-specialties held in the Cabinet for Health and Family Services, Protection and Permanency Department in Warren County.

## Results

### *Sample Demographics*

The demographic makeup of the final sample consisted of 9 females (75%) and 3 males (25.0%). Participants' ages ranged from 26 to 55 with a mean of 4.25 and median of 4.50 (e.g., as shown in Figure 1).

*Figure 1.**Figure 1. Age of male and female participants*

The participants reported working in the following job sub-specialties: Generic, Adoption/Permanency, Investigator, Ongoing/Treatment, Adult Service, Recruitment & Certification, Juvenile, Supervisor, Social Service Specialist, Trainer, Administrative Associate and CQI Specialist. The participants' current length of employment in their primary work setting ranged from 0 to 25 years of service with the agency.

The current study asked the question, to what extent do child protection workers exhibit symptoms consistent with psychological disorders. Descriptive statistics were ran to calculate the subscales for the entire sample upon completion of questionnaire (e.g., as shown in Table 1). Examination of Table 1 demonstrates that the overall mean score for burnout 30.58. Burnout was extremely low in the sample for all participants with the exception of two participants with scores in the high risk category. In the sub-category of burnout, 84% of participants scored extremely low risk. Scoring in the moderate low risk range was .8% and .8% for high risk of burnout. The overall mean score for compassion fatigue 32.17 with standard deviation 13.803. In

the sub-categories of compassion fatigue, 33% scored extremely low risk and 17% low risk.

Participants' scored at 25% for moderate risk of compassion fatigue with the remaining participants scoring 17% for high risk and .8% extremely high risk.

In the category of compassion satisfaction, the mean was 94.00 with a standard deviation of 14.013. In the sub-categories of compassion satisfaction 0% scored extremely high for compassion satisfaction, however 42% scored in the high potential level. The participants scoring good potential for compassion satisfaction was 42% and 16% scoring modest level for satisfaction. No participants scored below the 63 level which was the lowest rating in the compassion satisfaction sub-category.

*Table 1.*

#### Descriptive Statistics on Child Protection Workers

|  | N  | Minimum | Maximum | Mean  | Std. Deviation |
|--|----|---------|---------|-------|----------------|
| Gender of Participant                  | 12 | 1       | 2       | 1.75  | .452           |
| Age of Participant                     | 12 | 2       | 7       | 4.25  | 1.712          |
| Service Years of Participant           | 12 | 1       | 5       | 2.42  | 1.379          |
| Job Title of Participants              | 12 | 1       | 12      | 6.50  | 3.606          |
| Compassion Satisfaction of Participant | 12 | 70      | 117     | 94.00 | 14.013         |
| Burnout of Participant                 | 12 | 20      | 63      | 30.58 | 12.645         |
| Compassion Fatigue of Participant      | 12 | 21      | 72      | 32.17 | 13.803         |
| Valid N (list wise)                    | 12 |         |         |       |                |

In review of Appendix A and B, the two graphs illustrating compassion burnout and satisfaction share similarities. Appendix C represents compassion fatigue which shows an increase more than the other two psychometric categories. The similarities of appendixes A & B may indicate that there is some type of balance between the two.

## Discussion

There is a strong perception in the profession of social work that stress is a problem and is particularly associated with role ambiguity, discrepancies between ideals and work outcomes, and personal vulnerability characteristics of people who enter the profession (Lloyd et al., (2002). From descriptive accounts, the literature has identified social work as being a profession that is high risk of stress and burnout (Acker, 1999).

Using a random sample of child protection workers employed with the Cabinet for Health and Family Services in Warren County, Kentucky, the psychometric properties of the Compassion Fatigue Scale were administered. Based on the findings, the hypothesis that psychological symptoms are exhibited by child protection workers due to stressors of their specific job duties was supported in the psychometric property of compassion fatigue. The results indicate a lower risk for burnout in the staff regardless of their specific job sub-specialties, whereas their risk for Compassion Fatigue was increased. This correlation may be explained by the possible overlap of symptoms of burnout and fatigue. Previous published results are very similar to the data obtained in this study. Participants who experience lower burnout possessed higher levels of satisfaction and higher levels of fatigue. Personal vulnerability characteristics of people who enter the profession could be contributing factors to the scores indicated in the area of burnout, fatigue, and satisfaction. Findings also demonstrate that compassion satisfaction is possibly a protective factor against compassion fatigue and burnout, in that helpers with high compassion satisfaction scores were less likely to have corresponding higher compassion fatigue scores.

Based on the finding of this study, it is not clear if the onset of stress or psychological symptoms is a direct correlation between a child protection worker and their specific job sub-

specialties. The quantitative data obtained through the study indicated that the level of fatigue may be more prevalent in child protection workers than the level of burnout; therefore, some validity may exist in that levels of fatigue may lead to the development or onset of psychological symptoms and disorders among child protection workers. Analysis of the demographic factors of gender, age, and service years had very little impact on the study. An interesting observation regarding gender factor is that the males (n=3) scored lower and more even in all three psychometric categories than that of the females (n=9). Years of service with the agency and age factors were not found to have any bearing on the scoring in the areas of compassion fatigue, burnout, and compassion satisfaction.

#### *Methodological Limitations*

There were a number of limitations in need of addressing before this study can be a true measure of reality for child protection workers. The sample sized was exclusively small in comparison to the original purposed sample size. Based on the small sample size, an accurate representation of child protection workers may have not been represented in the study. A possible limitation in the study was that data was mainly obtained in a quantitative fashion, thus limiting the opportunity to obtain exploratory data. The exploratory data may have added to the validity of the study by factoring in demographics such as personal qualities, coping skills, or characteristics. Exploratory data such as peer, supervisor, and family support may have been important areas to assess and incorporate into the study. The instrumentation tool employed in the study may not have been sensitive to certain participants with diverse cultural backgrounds or physical limitations. The instrument tool is in English, therefore a limitation may exist when administering it to particular ethnic groups that may not speak English.

### Conclusion/Recommendations

Analysis of the quantitative data indicated that levels of compassion fatigue and burnout may overlap in their symptoms. Findings demonstrate that compassion satisfaction is possibly a protective factor against compassion fatigue and burnout. The participants with higher compassion satisfaction scores were less likely to have corresponding higher compassion fatigue scores. Furthermore, the quantitative data indicated with some consistency that perceived stress within the work place is prevalent at higher levels for many individuals in the form of compassion fatigue. Social workers have been found to have high levels of general anxiety and depression and poor mental health well-being as compared to normative population.

It is difficult to determine whether the psychological symptomatology was already present within the participant, or whether the perceived stress of their job sub-specialties resulted in them developing high levels of fatigue. Compassion fatigue, like burnout, can challenge a child protection worker's ability to render effective services and maintain personal and professional relationships. The analysis of the data indicated that compassion satisfaction may be a balance for those in high risk for compassion fatigue. Literature reveals that continuous exposure to compassion fatigue has been linked to child protection workers developing Post Traumatic Stress Disorder and other psychological symptoms and disorders. Based on this study, the exposure to fatigue would be an area of study and concern for child protection workers and administrators.

Future studies should focus on more qualitative data such as work hours, caseload numbers, training, peer and supervisory support, as well individual qualities such as coping skills. Planning and implementing stress management interventions may be a recommendation to ease the stressors of the child protection worker's job. As an administrator, is essential to continuously evaluate the supports available to the workers. It is critical that supports for a child protection



worker be available in order to meet the demand of their jobs. Based on this need, future recommendations would be for agencies to re-evaluate how they are meeting the needs of their workforce in ordering to preserve and maintain high quality staff.

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## Appendix A

